## UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND					
1 Date of Request: 5 20 05 2 Serial/Patent # 10 507369					
3 Please refund the following fee(s):		4 PAP NUM	PER IBER	5 DATE FILED	6 AMOUNT
	Filing			9/28/2	\$ 160
	Amendment				\$
	Extension of Time				\$
	Notice of Appeal/Appeal				\$
	Petition				\$
	Issue				\$
	Cert of Correction/Terminal Disc.				\$
	Maintenance				\$
	Assignment				\$
	Other			-	\$
		7 TOTAL AMOUNT S 60			
		8 TO BE REFUNDED BY:			
10 REASON:		Treasury Check			
	Overpayment		C	redit Dep	osit A/C #:
	Duplicate Payment		9		
	No Fee Due (Explanation):				
Credit Cored Refund					
11 REFUND REQUESTED BY:					
TYPED/PRINTED NAME: Fredericks			Smith title:		
SIGNATURE:			P	HONE:	
OFFICE: ************************************					
APPROVED: DATE:					

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B